

Termination of Pregnancy (Live Births) Amendment Bill 2024

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SUBMISSION re Inquiry into the Termination of Pregnancy (Live Births) Amendment Bill 2024

From DR Tim Coyle



Honourable Members,

I am currently a GP working in Cairns.

My understanding of this amendment to the 2018 Termination of Pregnancy Law is to enshrine in law obligatory care of the born child if born alive during an abortion procedure; other than a simple guideline from Qld Health as is the current situation.

Firstly, why are late gestation abortions being carried out anyway? Figures from Victoria (figures for Qld are not available) show that about 30% of late term abortions are done for “socio economic reasons”. This could be for any social reason on a viable healthy baby. A late abortion on a healthy baby of a healthy mother : an atrocity. In many countries this would be regarded as an atrocity. But Qld Labor’s 2018 Termination Law does not have any gestational limit.

It is argued that late abortions are done for serious medical reasons. Why are these not termed, labelled and regulated in the 2018 Termination Law? It is also claimed that late abortions do not happen! In Qld, between 2010 and 2020, 328 babies were born alive out of 1,153 late term abortions. Under the UK 1967 Abortion act there is a gestational limit of 23 weeks and 6 days.

Effects upon women.

What is the effect of a late abortion upon a woman or mother who undergoes a late abortion ? Abortion is often the effect of coercion, either in the form of economic pressure or situational pressure in a mother's social circumstances. Nearly all of these can be resolved by discussion and counselling with the offering of economic relief.

But the long term effects of abortion are long term, and profound. The most important act in any woman's life is that of giving birth to a child. The message of abortion is that a mother's child is just disposable rubbish. What a devastating notion for any woman. Not surprisingly medicare claims for mental health care plans have a disproportionate bias for women, many more plans for the female gender.

Effects on medical staff.

It is painfully obvious that some doctors and nurses do not feel themselves to be limited by any inherent respect for human life. Over half of the 248 Euthanasias in the first 6 months of legality in Qld were done by doctors, and doctors are claiming skills in lethal intracardiac injections pre birth for infants listed for abortion. However many doctors and nurses do have respect for human life to whom abortion is abhorrent and are profoundly affected by the procedure, process and would be caring for any baby born alive by an abortion process. Nor would any of these people feel limited by a law which essentially brings about the deliberate procured death of a viable, likely healthy, human child. Proper conscientious objection must be extended to these people. **Also passage of this amendment would relieve anxieties and provide a clearer treatment path when such children are born alive.**

Finally, for some reason, possibly inherent abortion zeal, Qld Labor have allowed the abortion industry to essentially dictate an Abortion Law which Qld Labor have followed, it would seem,

in its savage entirety. Even sex selection abortions are permitted in this 2018 law.

I fully support the proposed amendment,

The Bill amends the *Termination of Pregnancy Act 2018 (Act)* to:

- insert a new section (section 9A) to apply when a termination results in a live birth
- state that nothing in the Act prevents a 'relevant person' for the termination from exercising any duty to provide the person who is born with medical care and treatment that is clinically safe and appropriate to the person's medical condition
- clarify that the duty owed by a registered health practitioner to provide medical care and treatment to a person born as a result of a termination is no different than the duty owed to provide medical care and treatment to a person born other than as a result of a termination
- define 'relevant person' for a termination resulting in a person being born, as a registered health practitioner who performed the termination, and other practitioners, including students, present at the time.

Dr Tim Coyle.